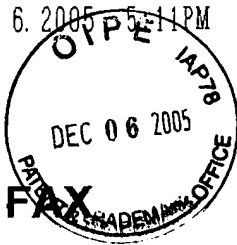


DEC. 6. 2005 5:11PM

GLAXO WELLCOME

NO. 8665 P. 1



GlaxoSmithKline

To BOX ISSUE FEE

Company USPTO

Fax (571) 273-2885

From Marjorie J. Pfeiffer

Tel 1-919-483-9038; Facsimile: 1-919-483-7988

E-mail marjorie.j.pfeiffer@gsk.com

Date December 6, 2005 Pages including cover 3

Subject Fee(s) Transmittal - Appl. No. 10/506,879

GlaxoSmithKline
PO Box 13898
Five Moore Drive
Research Triangle Park
North Carolina 27709

Tel: 919 483 2100
www.gsk.com

Re: Fee(s) Transmittal
Application of Fred Mieras KILLINGER
U.S. Serial No.: 10/506,879; Filed: September 3, 2004
Date of Mailing "Notice of Allowance and Fees Due": September 22, 2005
Confirmation No. 6675
Title: *Child Resistant Blister Packages Utilizing Walled Structures Enclosing Medicament Therein*
Attorney Docket No. PR60223USw

Attached:

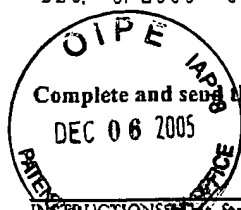
1. Fee(s) Transmittal (Part B), in duplicate
with Certificate of Transmission (37 CFR 1.8(a))

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RESEARCH TRIANGLE PARK, NC 27709-3398

12/07/2005 TBESHAH2 00000075 071392 10506879

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:8001 12.00 DA

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Certificate of Mailing or Transmission

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Marjorie J. Pfeiffer (Depositor's name)
Marjorie J. Pfeiffer (Signature)
December 6, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/506,879	09/03/2004	Fred Micrae Killinger	PR60223USW	6675

TITLE OF INVENTION: CHILD RESISTANT BLISTER PACKAGES UTILIZING WALLED STRUCTURES ENCLOSING MEDICAMENT THEREIN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/22/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MOHANDESI, JILA M	3728:	206-438000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47: Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Robert J. Smith

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SMITHKLINE BEECHAM CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Philadelphia, Pennsylvania

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ Issue Fee
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5. Change in Entry Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Robert J. Smith

Date

11-28-05

Typed or printed name

Robert J. Smith

Registration No.

40,810

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